

SECTION I: SCENARIO OVERVIEW

Scenario Title:	Tina Lane Case: Identifying Sex Trafficking Victim	
Original Scenario Developer(s):	Jo Loomis DNP, FNP-C, CHSE	
Date - original scenario 10/13/2012, revised 8/16/2019	Validation: 12/2020	Pilot testing: 11/16/19
Estimated Scenario Time: 15 minutes		
Debriefing time: 30 min		
Target group: Nurse Practitioner Students enrolled in Advanced Physical Assessment (first clinical course)		
Core case: Identification of Sex Trafficking Victim, assessment of adolescent with urinary tract infection and pelvic inflammatory disease (PID).		
Brief Summary of Case: Adolescent female is brought to clinic with chief complaint of pain on urination. She is accompanied by an older male identified as a 'boyfriend' who is overbearing in his behavior to the patient. NP student in the role of provider must recognize the need to separate patient and perform physical and sexual health assessment, provide treatment plan, and contact proper authorities.		
QSEN Competencies & TeamSTEPPS Competencies		
<input checked="" type="checkbox"/> X Patient Centered Care <input checked="" type="checkbox"/> X Patient Safety <input checked="" type="checkbox"/> X Teamwork and Collaboration	<input checked="" type="checkbox"/> Informatics, <input checked="" type="checkbox"/> Quality Improvement <input checked="" type="checkbox"/> X Evidence Based Practice	

EVIDENCE BASE / REFERENCES (APA Format)

- National Human Trafficking Resource Center (2020). Identifying Victims of Human Trafficking Fact Sheet. US Department of Health and Human Services.
https://www.acf.hhs.gov/sites/default/files/orr/fact_sheet_identifying_victims_of_human_trafficking.pdf
- Ernewin, C. & Nieves, R. (2015). Human Sex Trafficking: Recognition, Treatment, and Referral of Pediatric Victims. *Journal for Nurse Practitioners*. 11,8. 797-803.
- Iman, T. (2020). Bacterial urinary tract infections *Merck Manual* (online)
<https://www.merckmanuals.com/professional/genitourinary-disorders/urinary-tract-infections-utis/bacterial-urinary-tract-infections>
- Goje, O. (2019) Pelvic Inflammatory Disease, *Merck Manual* (online)
<https://www.merckmanuals.com/professional/gynecology-and-obstetrics/vaginitis,-cervicitis,-and-pelvic-inflammatory-disease-pid/pelvic-inflammatory-disease-pid>
- Photo Credit CNN <https://www.napnappartners.org/tattoos-human-trafficking-victims>

SECTION II: CURRICULUM INTEGRATION

A. SCENARIO LEARNING OBJECTIVES

Critical Learner Actions

1. Wash hands and introduce self to patient.
2. Take patient history, focusing on chief complaint
3. Perform physical exam
4. Develop differential diagnoses list

B. PRE-SCENARIO LEARNER ACTIVITIES

Prerequisite Competencies

Knowledge	Skills/ Attitudes
1. Sexual health history assessment	1. Taking a sexual health history
2. Physical examination	2. Performing a physical examination
3. Sexually transmitted disease assessment	3. Performing a pelvic examination
4. Recognition of potential sex trafficking	4. Making an agency referral

SECTION III: SCENARIO SCRIPT

A. Case summary

This case is designed to focus on the beginning skills of performing a sexual health history but could be expanded to include the physical skill of performing a pelvic examination. This would require a specific arrangement with the SP/actress for this case. As written it is considered a non-invasive physical examination case. The pelvic exam findings are provided for the NP student in the form of 'cue cards.'

B. Key contextual details

Setting: Primary Care Clinic room in Simulation Laboratory

C. Scenario Cast

Patient	<input type="checkbox"/> High fidelity simulator	<input type="checkbox"/> Mid-level simulator	<input checked="" type="checkbox"/> Standardized Patient
	<input type="checkbox"/> Task trainer	<input type="checkbox"/> Hybrid (Blended simulator)	<input type="checkbox"/>
Participants/Role	Brief Descriptor (Optional)	Imbedded Participant (IP) or Learner (L)	
Patient	Youthful female actor (SP)		
	Male companion actor (SP)		
Provider	Nurse Practitioner Student		
	NP Faculty as Preceptor		

D. Patient/Client Profile					
Last name: Lane	First name: Tina	Gender: Female	Age: 15	Spiritual Practice:	unknown
Ethnicity: Caucasian	Language: English	Vital Signs: T 100.8 ⁰ P 92, R 18		BP 110/75 Ht. 5'5' Wt. 108 lb. BMI 17.5	
1. Chief complaint					
<i>Pain on urination.</i> I feel like I'm peeing all the time and it burns. Will reluctantly admit it hurts to have intercourse if asked. `					
Personality/Emotional tone/ Approach: <i>Tina is shy and hesitant to speak in Bobby's presence. Bobby is defensive and pushy.</i>					
History of Present Illness: Pain on urination for past week.					
Past Medical/surgical history: No significant past medical or surgical history.					
OB/GYN history: Menarche age 11, regular monthly periods since then. Sexually active for past 6 months with multiple male partners daily. Two medical abortions in past 6 months.					
Social History: Tina left school in Houston and has been exchanging sexual activity for money for the past six months for her pimp and boyfriend Bobby. Tina is a US citizen, having been born in Texas. Her parents are unaware of where she is, or that she has been taken to San Francisco to work.					
Family Health History: Unknown					
Diet History: Mostly fast food					
Current Medications: None					
Medication allergies:	NKDA		Reaction:		
Food/other allergies:	No known allergies.		Reaction:		
Physical Exam: (Each component of exam is provided for NP student in form of 'cue cards' after student performs or describes the examination process.)	Thin, anxious looking young woman scantily dressed. HEENT: WNL Heart: S1, S2 with no adventitious sounds. Lungs: Clear to auscultation. Skin: Tattoo on chest depicting crown and initials. Abdomen: Tender to palpation in both lower quadrants. Pelvic exam: Mucopurulent cervicitis with positive cervical motion tenderness.				

4. Laboratory, Diagnostic Study Results (List significant labs, & diagnostic test results)
UA per dipstick: Bacteria present, > 1+ RBCs, positive leukocytes and positive nitrites (cue card)

Sim Set-up card		
Patient Information	Set-Up / Moulage	Equipment/Supplies
<p>Tina has a \$1,000 quota per night that she must earn for Bobby. He tells her he is saving money for them to buy a house. Tina is often scared while out on the streets, but Bobby reminds her that she is making money for their future and that the situation is only temporary. Bobby has other girls who work on the streets for him, but Tina knows that she is special to him because Bobby does not hit her like he does the others.</p> <p>Tina has developed pain when she urinates and sees bright red blood in the toilet after she urinates. She also has pain deep in her abdomen.</p> <p>Bobby brings her into the clinic and is hovering over her, defensively answering all the questions for her.</p> <p>If the NP questions Tina further, she may disclose that she is often afraid on the street and has 6-10 customers per night with</p>	<p>Actress/SP is scantily dressed, wearing exaggerated facial make up.</p> <p>Tattoo (moulage) on chest below left clavicle depicting crown and initials. Present photo on cue card.</p>	 <p>Image: CNN https://www.napnappartners.org/tattoos-human-trafficking-victims</p>

unprotected sex. She has burning and pain when she urinates and sees bright red blood sometimes in the toilet bowl. She has mild pain when the NP presses on her lower abdomen. She has had two medical abortions in the past 6 months with pills that Bobby provides for her.			
CASE FLOW / TRIGGERS/ SCENARIO DEVELOPMENT STATES			
Initiation of Scenario: Patient and 'boyfriend' waiting in simulated clinic examination room setting when NP student arrives.			
Patient is sitting on the exam table, 'boyfriend' actor is hovering over her.			
STATE / PATIENT STATUS	DESIRED LEARNER ACTIONS & TRIGGERS TO MOVE TO NEXT STATE		
Baseline	Operator	Learner Actions	Debriefing Points:
NP student introduces self and begins assessing patient. 'Bobby' answers for the patient. NP student asks Bobby to leave the room and after arguing briefly he does leave room. NP student continues to elicit health history and then proceeds to	Triggers	NP student asks Bobby to leave the room so that the student may examine the patient in private. After arguing briefly he does leave room. NP student discusses options with faculty preceptor and then with SP. NP student conducts health	Discuss privacy for adolescents during sexual health assessment. Appendix A includes assessment points for bacterial urinary tract infection and pelvic inflammatory disease and for assessment of a potential victim of sexual trafficking.
	Overbearing male SP answers questions for the female SP		

<p>conduct physical examination of patient.</p>	<p>Once alone, female SP discloses her situation to NP student.</p>	<p>assessment and physical examination.</p> <p>NP student develops three differential diagnoses: bacterial urinary tract infection, possible pelvic inflammatory disease, possible victim of human sex trafficking.</p>	
<p>Scenario End Point: NP Student wraps up the visit with a treatment plan and discussion with patient about options including a call to the national human trafficking hotline or referral to local county law enforcement agency.</p>			

APPENDIX A: Differential Diagnoses and De-brief: Important Take-Home Points to discuss post case:

Urinary Tract Infection:

Symptoms:

- Frequency
- Urgency
- Burning on urination
- Suprapubic pain
- Low back pain

Diagnosis laboratory tests:

- Urinalysis
- Urine culture

Treatment:

- Antibiotics “Choice of antibiotic should be based on the patient’s allergy and adherence history, local resistance patterns (if known), antibiotic availability and cost, and patient and provider tolerance for risk of treatment failure” (Merck Manual Online)
- Phenazopyridine if desired for dysuria

Pelvic Inflammatory Disease:

When symptoms are present, the most common symptoms of PID are

- Lower abdominal pain
- Mild pelvic pain
- Increased vaginal discharge
- Irregular menstrual bleeding
- Fever ($>38^{\circ}$ C)
- Pain with intercourse
- Painful and frequent urination
- Abdominal tenderness
- Pelvic organ tenderness
- Uterine tenderness (along with endometriosis)
- Adnexal tenderness (along with salpingitis)
- Cervical motion tenderness
- Inflammation

Diagnosis:

- High index of suspicion
- Polymerase chain reaction (PCR)
- Pregnancy test

Treatment:

- Antibiotics appropriate for *N. gonorrhoeae*, *C. trachomatis*
- HIV testing

Human trafficking victims:

- Are involved in domestic, sex, or farm work and multiple other types of service jobs.
- Are drawn into the work by means of force, fraud, or coercion.
- May be minors in the U.S. under the age of 18 involved in a commercial sex acts.
- Are not the same as persons who are smuggled.
- Are primarily women and children.
- Are often kept in isolation and may adapt to the situation.
- Are likely not to be identified by health care providers.
- Have access to health and legal interventions when identified.
- May benefit from interventions based on the stage of trafficking they are in when identified; and,
- Are burdened for a lifetime with physical and mental health effects.

Red flags for providers

- Discrepancies in behavior and reported age
- Evidence of sexual trauma
- Multiple or frequent sexually transmitted infections
- Excessively large number of pregnancies
- Tattoos or other types of branding
- Use of slang relating to involvement in prostitution
- Evidence of controlling or dominant relationship
- Malnourishment or generally poor health

The National Human Trafficking Hotline connects victims and survivors of sex and labor trafficking with services and supports to get help and stay safe. The Trafficking Hotline also receives tips about potential situations of sex and labor trafficking and facilitates reporting that information to the appropriate authorities in certain cases. Phone: 1-888-373-7888